

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000120103

**FILED**  
**Oct 06, 2010**  
**Secretary of State**

**Entity Name:** 1 VISION MEDIA GROUP LLC

**Current Principal Place of Business:**

195 NW 127 AVE  
MIAMI, FL 33182

**New Principal Place of Business:**

**Current Mailing Address:**

195 NW 127 AVE  
MIAMI, FL 33182

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ENRIQUEZ, ELAINE  
195 NW 127 AVE  
MIAMI, FL 33182 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ELAINE ENRIQUEZ

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ENRIQUEZ, ELAINE  
Address: 195 NW 127 AVE  
City-St-Zip: MIAMI, FL 33182

Title: MGRM  
Name: ENRIQUEZ, VIRGINIO  
Address: 195 NW 127 AVE  
City-St-Zip: MIAMI, FL 33182

Title: MGRM  
Name: CUE, MILKA D  
Address: 5730 NW 111 ST  
City-St-Zip: HIALEAH, FL 3312

Title: MGRM  
Name: BLANCO, AMALFI  
Address: 5249 NW 7 ST APT 409  
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ELAINE ENRIQUEZ

MGRM

10/06/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date